

The whole substance of the prostate gland was riddled by abscesses. Besides the opening made by the trocar, there were several other holes (with ulcerated margins) leading from the bladder into the cellular tissue between it and the rectum. There was also a false passage in the floor of the urethra, leading into the same space; and as the opening made by the trocar was pretty exactly in the middle line, an instrument passed with great readiness from the false passage through that opening into the bladder. Besides this, there was an ulcerated opening leading into the recto-vesical pouch of the peritoneum; and bloody fluid had been extravasated into the latter cavity. On the opposite side of the pouch, the gut was adhering to the bladder, near the ulcerated opening, and its coats showed traces of commencing ulceration. The whole of the body was enormously loaded with fat. No other organs were examined.

Hospital Gleanings.

BEST TREATMENT OF VARICOSE ULCERS AND VARICOSE VEINS: MODE OF FORMING CAUSTIC ISSUES: SUPERIORITY OF THE VIENNA PASTE, ETC.

THE treatment of varicose veins is a practical every day subject, inferior to none in interest for the hospital surgeon. Indeed, allied as this affection is, externally, to questions of practical surgery on the one hand, and depending for its causes on relations of the general venous system and general internal health on the other, a wide field of speculation is afforded as to treatment. In hospital practice, accordingly, as the practitioner may be more of a physiologist and anatomist, or more or less influenced by the ordinary routine of simple surgical treatment, ligature of veins, constitutional treatment, or means of blocking up these vessels, will be trusted to, previous to healing the varicose ulcer. A good deal of the danger of ligature of veins is found to originate in the fact that the vein is enlarged; and the ligature, when it should go deeper than the vein, will be found to have wounded or transixed the vein, and caused phlebitis.

Mr. Paget's experience every year assures him more and more of the superior value of the treatment of varicose veins by the caustic issue, or the extemporised mixture of lime and potash. There is no mode of treatment yet discovered, according to Mr. Paget, which is entirely free from risk; but, from pretty extensive inquiries in the hospital practice of such surgeons as Sir B. Brodie, Mr. Lawrence, Mr. Skey, various hospital surgeons in the provinces, and in France and Germany, etc., Mr. Paget is inclined to the impression that the treatment of varicose ulcers and varicose veins is most safely and most effectually conducted by means of local applications of caustic issues on the surface, which thicken the coats of the venous trunk.

A very well marked case of varicose ulcer of the leg and foot, which incapacitated the poor young man from employment and deprived his family of support, has been for some weeks in St. Bartholomew's, as well as a second case, where the varicose vessel gave way, but has again healed up. The former case is that of A. D—, a young and apparently otherwise active and healthy man aged 28. He has been all the present month (September) under treatment for a varicose condition of the veins of the lower extremity: his disease consists rather of a very troublesome ulcerated condition of the ankle and foot, which he cannot himself conceive to be dependent on the state of the veins. The history he gives of the case is not very defined, or is but a recapitulation of a set of abortive attempts to cure his ankle by ointments, lotions, salves, etc., each in

its turn recommended to him as the most specific thing in the world for an inward disorder of the constitution, but still only making his disease worse.

The form of caustic used by Mr. Paget consisted of potassa fusa \mathfrak{D} ij, quick-lime \mathfrak{z} j, separately in powders in small phials, and subsequently mixed with a glass or asbestos rod at the bedside, with spirits of wine, when used. A dozen or two of small pieces of common adhesive plaster are next obtained, each the size of a penny, a small circular hole being cut in each, of the size of a pea, or a silver threepence. One of these perforated pieces of plaster is placed over each projection or varicose enlargement of the vein, a very small quantity of the caustic paste is next applied with a bone spatula to the skin over the vein, in the circular hole left in the plaster: ten to twelve or fifteen minutes will be sufficient time for the issue to produce its effect, at the expiration of which period, the whole limb is carefully sponged with warm water, and all the plasters and caustic washed away. Little else was necessary in this case, as in the general class of these cases, the issue merely requiring simple dressing, while the ulcers in the ankle went on healing *pari passu*.

As a local application to the ulcer during the action on the varicose vein of the issue, any simple ointment or black wash is all that is required.

TREATMENT OF PURULENT AND OTHER BAD FORMS OF OPHTHALMIA: NEW FORM OF LOTION.

The interest attaching to eye cases is so great that, even at the risk of being deemed empirical, so that one may save an eye from destruction, we may here give a form of lotion in extensive use in hospitals, due to the practice, we believe, of Mr. WHARTON JONES—a lotion which is almost specific in various forms of purulent ophthalmia and chronic conjunctivitis. Mercury, perhaps it may be said, will rarely, if ever, be required internally in purulent ophthalmia: the utmost decision, cleanliness, and care, are, however, necessary in treating such cases with lotions, as well as sedulous attention to the condition of the *primæ viæ*. Some practitioners prescribe small doses of mercury so as to affect the system slightly; but as observed to his class recently by Mr. Wharton Jones, inflammations of mucous passages are not those that are ever much benefited by mercury. This active agent or leeches may restrain the submucous cellular effusion, and prevent swelling; but we should take care how we affect the bowels and various chylopoietic viscera, by pushing the use of the mineral to pytalism.

When chemosis is slight, and ulceration has already set in, mercury can do very little good. Tyrrell's plan of scarification, though not very strongly recommended by Mr. Dixon, will be found useful, especially in the lighter and more chronic forms of ophthalmia; and where we require a lotion in place of that usually made of nitrate of silver, the following, in an ounce bottle, is best, with or without leeches:

\mathfrak{R} Cupri sulphatis gr. ij; vini opii \mathfrak{z} j; aquæ dest. 3 vij. Fiat lotio.

It is applied freely with soft camel's hair brush three times a day.

ENLARGED BURSA OF THE KNEE INJECTED WITH IODINE.

There is a very practical case at present under the care of Mr. PAGET—a case of enlarged bursa of the knee, treated by injecting tincture of iodine into the bursal cavity. The lad is aged 18, and was admitted a month since (August 26th). Mr. Paget believes the iodine a better plan of treatment than issue, or anything more formidable. The swelling, which existed for seven months, has now disappeared.

PHAGEDÆNIC ULCERS AND THEIR TREATMENT: INUTILITY OF CHLORATE OF POTASH: VALUE OF OPIUM.

A form of disease, which is often met, in various aggravated shapes, in hospital practice, is the spreading phagedænic sore, not specifically related to syphilis, but

attacking that and other forms of constitutional ulcer, and running its devastating course almost without let or hindrance. Several very marked cases of this kind of ulcer have been in Guy's and St. Bartholomew's Hospitals recently, but yielding more readily to opiate treatment than to any other which had been tried.

Joseph R., aged 53, admitted into Guy's Hospital, Aug. 13th, with what has subsequently proved to be a large phagedænic spreading sore of penis and scrotum—one of those cases, according to Mr. Cock, under whose care the case has been treated, which would do better in the country than in the confined air and inferior hygienic conditions of a crowded hospital like Guy's. The poor man has lost flesh, and become quite haggard looking and old, or, as he expresses it himself, "he is twenty years older looking this month than last"—the constitutional effect has been so intense and continuous. On his first admission to hospital, Mr. Cock essayed to bring the ulcer under the influence of chlorate of potash, but was disappointed, as he states he usually has been at Guy's, with the effect of this medicine. Simple doses three times a day, and subsequently a lotion of terchloride of carbon, were found to be almost useless. Quinine also was tried, but with nearly similar results; the phagedænic disease, even without any known cause, syphilitic or other, spreading more and more.

Sept. 7th. The lotion of terchloride of carbon was discontinued, in consequence of the pain it caused. The ulcer is still unchecked.

Sept. 12th. The quinine mixture is given three times a day, and a grain of opium night and morning, as patient is no better.

Sept. 16th. Mr. Cock to-day, as a last resource, placed the man fully under the influence of opium. A large quantity of the scrotum, and nearly the entire penis, are literally eaten away. A strong lotion of opium is ordered to be applied to the parts (this lotion is made by boiling down opium as an aqueous solution), in which bits of lint are wetted, and then applied to the parts. The internal use of opium also is continued.

Sept. 24th. The parts are now healing rapidly.

LARGE INGUINAL ANEURISM: LIGATURE OF THE EXTERNAL ILIAC.

Amongst the striking cases in Guy's Hospital, is a patient admitted on September 15th, with large femoral or inguinal aneurism, under the care of Mr. HILTON. This case underwent the formidable operation of deligation of the external iliac artery on Monday last (Sept. 22nd). It will be interesting to notice in this instance when the ligature shall have come away, for comparison with the recent successful case under Dr. Brookes of Cheltenham (*JOURNAL*, Sept. 20th). The case is that of Thomas D., aged 51, apparently a strong stout man, accustomed to hard labour, during which, he thinks, about three months ago, in some accidental manner, he gave himself a strain, and afterwards felt the present tumour in his left groin. It has increased till it has attained the size of a large egg. On his admission to hospital, the nature of the tumour was at once recognised. Mr. Hilton first tried ice, and the following draught every six hours.

R̄ Tincturæ digitalis m̄x; tincturæ belladonnæ m̄v; misturæ camphoræ ʒj. M.

September 22nd. As the danger of delay is becoming every day more obvious, Mr. Hilton decided to-day to ligature the external iliac. The aneurismal sac was found to press against Poupert's ligament, and, in fact, to overlap the external iliac.

September 24th. The patient is going on very well; he has a dose of opium at night. He has discontinued the digitalis since the operation; and Mr. Hilton now recommends generous diet. The operation was beautifully done, and has quite commanded the circulation. We shall take another opportunity of stating the result of the case. The statistics of this operation are now well established.

OPERATION ON A LARGE CICATRIX FROM BURN.

Mr. HILTON has a very instructive and successful case of operation also, for the cicatrix of a burn, in one of his wards in Guy's Hospital. The patient, G. B., aged 6½, a fine boy, was admitted so long ago as June 18th, with his arm firmly tied to his side by a large and indurated cicatrix. The axilla was obliterated, and the case altogether as hopeless as one might expect to see in several years of hospital practice. The operation consisted of a free *débridement* of all the parts, during which the *teres major* and *minor*, and *serratus magnus* on the lateral aspect, with the *pectoralis* in front, were all laid bare. A thickish cord was next placed like a figure of ∞; one loop round the neck, like a necklace; the second loop against the edge of the axilla. The arm also was kept separated by a sort of crutch attached to the pelvis. The case is now one of the most perfect cures of this nature ever seen at Guy's. The cord was constantly wetted with a solution of nitrate of silver.

K.

Original Communications.

ON FÆCAL FERMENTATION AS A SOURCE OF DISEASE.

By C. H. F. ROUTH, M.D., Physician to the St. Pancras Royal General Dispensary; Assistant-Physician to the Samaritan Hospital for Women and Children; Vice-President of the Medical Society of London; etc.

[Read before the Medical Society of London, May 17th, 1856.]

PART III (*concluded*).

WE will now notice some individual diseases which are capable of being produced by fæcal emanations.

Cholera. Pettenkofer is one of those, I believe, who states that diarrhoeic fluids will, during choleraic seasons, develop through fermentation cholera poison; that this change depends much upon the nature of the soil—a damp soil favouring this fermentation, which a rocky soil in measure prevents; and that this cholera virus develops, according to the idiosyncrasy of the patient seized, cholera, cholerae, or simple diarrhoea. Whether this view be admitted or not, it cannot be denied that emanations from *cholera stools* will sometimes produce cholera. It has, I think, been fully proved by Drs. Alison and W. Budd, as is clearly shewn in the papers written by these gentlemen, and respectively published in the *Edinburgh Medical Journal*, Dec. 1855, and the *ASSOCIATION JOURNAL* of 1854, that the poison of cholera is multiplied rapidly in the stools and fæcal matters generally, and acts chiefly in consequence of a particular decomposition which it subsequently undergoes in these, becoming therein so concentrated, that an emanation therefrom may produce the disease in its recipient. I think that one fact adduced is conclusive upon this point. Although the same water was drunk by all the inmates in a large workhouse, those only who made use of the same privies or receptacles for cholera dejections caught the disorder, while the recurrence of cholera seizures was effectually prevented by guarding the avenues leading to these, and by preventing persons not affected with cholera from using them. The miseries endured by our troops in the Crimea, who were obliged to encamp over the same filthy *locale* where the Russians affected with cholera had previously been quartered, is a sad confirmation of the same tale. Certain it is, that in Dr. Lindsay's hands, experiments made by him with the emanations from evacuations and blood, and from clothes saturated by the evacuations and breath of cholera patients, were followed by specific results. In his experiments, cholera was simultaneously developed in four animals, and proved fatal in two of these.